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STATE OF WASHING TON OF ECOLOGY-CENTRAL REGIONAL OFFICE DEPARTMENT OF ECOLOGY-CENTRAL REGIONAL OFFICE DEPARTMENT OF ECOLOGY-CENTRAL REGIONAL OFFICE OF WATER RIGHT

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

(Check all that apply.) Change purpose(s) of use Add purpose(s) of use Change point(s) of diversion/withdrawal Add point(s) of diversion/withdrawal Change/transfer place of use Other (i.e. consolidation, intertie, trust water)	DATE ACCEPTED 11 FEE \$ 305.55 REC	(3)
Explain: CUELL #3 DOWN, MONE TO WELL CUHICH MAS NO RIGHTS	ECY Coding: 001-002-W	R10285-000011
**IF MORE SPACE IS NEEDED, ATTACH ADDI 1. Applicant Information: APPLICANT/BUSINESS NAME MOSES COULEE WATER ASSOCIATION APPLICANT	PHONE NO.	FAX NO.
ADDRESS PALISADES ROAD CITYPALISADES,	STATE WA	ZIP CODE 988 45-
CONTACT NAME (IF DIFFERENT FROM ABOVE) DAYE FARLEY ADDRESS	PHONE NO. (509)884-383,	FAX NO. (`)
ADDRESS 385 PALISADES RO CITY PALISADES	STATE CEJA	ZIP CODE 98845
2. Water Right Information: WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)	9501
G1425724C DO YOU OWN THE RIGHT TO BE CHANGED? ☑ YES ☐ NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	MOSES COULÉE WATER	R ASSOCIATION
Please attach copies of any documentation that den was established. Also, if you have a water system papplication.	monstrates consistent, historica	
application.		

PARENT! 64-257246WRIS

C64-25724C

WRDUD!

3. Point(s) of Diversion/Withdrawal:

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And .		e 133		16.1

SOURCE		NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
WELL 3	LOT 13	3	SE	SW	12	21	ZZEWA	67900000300	277480

B. Proposed

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
WELL # LOT 25A					y .		67800000401	

DO YOU OWN THE EXISTING AND PROP SIMILAR TO OTHER UBLY

Since PROCH 15 DRAWAL?

DO YOU OWN THE EXISTING AND PROP SINCE to OTHER USU, DRAWAL?

EXISTING: YES | NO PROP(It resume THIS LOTASA /IDE OWNER /

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
IRRIGATION - Domestic BACK- 4P	Ø		ON DEMAND FOR PROST
(THIS WELL ESDOWN)			OR DOMESTIC FAILURE

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
IRRIGATION	1,400		APRILI TO OCTOBER 15
		1 3	

5. Place of Use:

		LE	GAL DESCR	IPTION OF LA	ANDS WHERE WATER IS PRES	SENTLY USED:	
581/4	. SW/s	SECT	YON 12	· 7.21	N, R. 228.W.	M.	
	7						
Macc	e C	25 1	AYSE	Ques	10 715 1		
7058	5 (001	. E. E W	ATER	Assoc	IATION		
7058	5 (BUI	SEC.	TWP.	ASSOC RGE.	COUNTY	PARCEL #	# OF ACRES

OF ACRES
1

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

YES MO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):

or seasonal or temporary, start date// END date/ rtain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department has requested notification of potential taxable water right related actions and therefore may be profibed a copy of this request. rease contact the State Department of Revenue for further information. The phone number is (360) 570-32 and dress is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477	Remarks and Othe	r Relevant Informa	ation:	W. * .	
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